## STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING

1594 West North Temple Suite 1210 Box 145801

Salt Lake City, Utah 84114-5801 Telephone: (801) 538-5291 Fax: (801) 359-3940



## ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

| I.  | <u>Genero</u> | al Information  |
|-----|---------------|---|
|     | 1.            | Report Time Period: From (mo./yr.)  |
|     | 2.            | DOGM File Number (Mine No): M1391002 ( RCS SALT + CLAY )                        |
|     | 3.            | Mine Name: REDMOND MINERALS INC. MINES  |
|     | 4.            | Mineral(s) Mined (or permitted to mine):  |
|     | 5.            | Type of mine Surface Mine or Underground Mine                                   |
| 100 | 6.            | Legal Description (Location of Lands Affected):                                 |
|     |               | W 1/2, W 1/2,1/4, Section Zy, Township 305, Range /W                            |
|     |               | 1/4,1/4,1/4, Section, Township, Range   |
|     |               | 1/4,1/4,1/4, Section, Township, Range   |
| 7.  | Name          | of Operator or Company: REDMOND MINESCALS INC.                                  |
|     | 8.            | Permanent Street Address: 6005 N 100 W  |
|     |               | City, State, Zip: REDMOND UT 84652  |
|     |               | Phone: (435) 529-7402   |
| -   | 9.            | Company Representative (or designated operator):                                |
|     |               | Name: RONALD BOSSHARDT  |
|     |               | Title: GRESIDENT  |
|     |               | Business Address: 6005 N 100 W  |
|     |               | City, State, Zip: RESMOND UT. 84652   |
|     |               | Phone: (435) 529-1402   |
|     |               | ☐ Please check if any of the above information has changed since previous year. |
| II. | <u>Mining</u> | and Reclamation   |
|     | 1.            | Was the mine active during the past year? Yes No □ 70,000 SALT                  |
|     | 2.            | If active, how much ore or mineral was mined? 30,000 BENTONITE                  |
|     | 3.            | If inactive, what year was the mine last active?                                |

|                    | 3. How much additional acreage was disturbed during the past year?   |
|--------------------|--|
|                    | <ol> <li>Briefly describe any new or additional surface disturbances that occurred during the past year. This description should include the type of work performed, and volume of material moved.</li> </ol>  |
|                    |  |
|                    |  |
| 5.                 | How much acreage was reclaimed during the past year?   |
| 6.                 | Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.  |
|                    |  |
| 7.                 | What is the total disturbed acreage at years end?  |
| 8.                 | Briefly summarize any mining and/or reclamation plans for the upcoming year.   |
|                    |  |
|                    |  |
|                    |  |
| NOTE:              | Section III., "Additional Information" applies only to large mining operations.  |
| III. Addition      | al Information   |
| 1.                 | An updated surface facilities map should be attached if there have been significant changes since the previous was submitted.  |
| 2.                 | Any monitoring results or other reports that are required under the terms of the approved notice of intention should also be attached.   |
| IV. <u>Signatu</u> | re Requirement   |
| I he               | reby certify that the foregoing is true and correct.   |
|                    | Name (Typed or Print):  **Resident Control of Control o |
|                    | Title of Operator:  **PRESIDENT**  **Title of Operator:**  **Title of Operator:**  **PRESIDENT**  **Title of Operator:**  **Ti |
|                    | Signature of Operator:   |
|                    | Date: 12-16-97   |
| jb<br>MR-AR        |  |